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Attorney Docket No.: 02SPE118P-DIV

# 11C Amdt.

M. Braunson

8/15/02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

**Bin Zhao**

Serial No.: 09/686,323

Filed: October 9, 2000

For: **Method of Fabricating an  
Interconnect Structure Employing  
Air Gaps Between Metal Lines and  
Between Metal Layers**

Art Unit: 2814

Examiner: Ginette Peralta

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**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Honorable Commissioner of  
Patents and Trademarks  
Washington, D.C. 20231

Dear Sir/Madam:

This is in response to the Office Action dated March 28, 2002 in the above-referenced patent application. Please enter and consider the following amendment and remarks.



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## AMENDMENT COVER SHEET

RE APPLICATION OF: Bin Zhao

APPLICATION NO.: 09/686,323 FILED: October 9, 2000

RE: Method of Fabricating an Interconnect Structure Employing Air Gaps Between Metal Lines and Between Metal Layers

NORABLE COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

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Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

No additional fee is required.

The fee has been calculated as shown below:

EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$ 110.00
SECOND MONTH AFTER TIME PERIOD SET	400.00	200.00	\$
THIRD MONTH AFTER TIME PERIOD SET	920.00	460.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,440.00	720.00	\$

TOTAL EXTENSION FEE \$ 110.00

FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	25	MINUS **28	* = 0	x 18	x 9	\$
INDEPENDENT	2	MINUS ***3	* = 0	x 84	x 42	\$
First presentation of multiple dependent claim				+ 280	+ 140	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

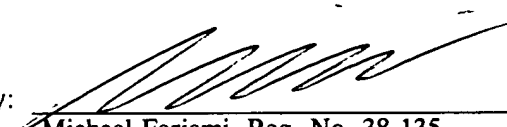
If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.

\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.

\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

- ] Total fee for Supplemental Information Disclosure Statement \$ \_\_\_\_\_
- ] Enclosed is the total fee of \$ 110.00.
- ] Please charge Deposit Account No. 50-0731 in the amount of \$ \_\_\_\_\_
- ] The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

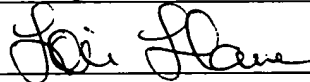
re: 7/18/02

By:   
Michael Farjami, Reg. No. 38,135

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, on:

7-18-02



Signature

Lori Llave

Typed or Printed Name of Person Mailing Paper and/or Fee

Michael Farjami, Esq.  
Farjami & Farjami LLP  
18 Sand Canyon  
Irvine, CA 92618  
(714) 784-4600